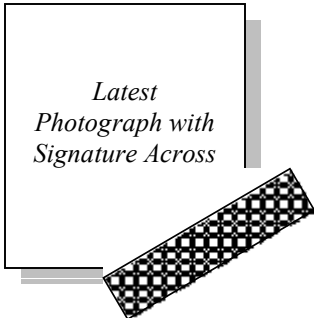




SBI DFHI Limited

Registered Office- Mumbai
Voltas House, 3rd Floor, 23, J.N. Heredia Marg,
Ballard Estate, Mumbai-400 001

Individuals



(to be filled in BLOCK letters)

Personal Details

Name			
	(First Name)	(Middle Name)	(Last Name)
Father's/Husband's Name			
	(First Name)	(Middle Name)	(Last Name)
Date of Birth	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female		Marital Status <input type="checkbox"/> Married <input type="checkbox"/> Unmarried
PAN Number <i>(proof to be enclosed)</i>	<input type="text"/>		
	District / Ward/ Circle: _____		

Address Details

Address Residence <i>(proof to be enclosed)</i>			
	City _____	State _____	Pin Code <input type="text"/>
Permanent Address <i>(if different from correspondence address)</i>			
	City _____	State _____	Pin Code <input type="text"/>

Contact Details

Residence-Telephone	_____	Fax	_____
Office -Telephone	_____	Fax	_____
Mobile	_____		_____
Email ID	_____		_____

Financial Details/ Information about Investment preference

Income Range
(per annum)

- Below Rs.3 lac Rs.3 lac to Rs.5 lac Rs.5 lac to Rs.10 lac
 Rs.10 lac to Rs.25 lac Above Rs.25 lac

Please tick your
areas of interest

- Government Securities Certificates of Deposit Commercial Paper
 Corporate Bonds

DECLARATION

I undertake that I will make payments towards my transactions from my designated bank account and I will deliver securities from my designated Demat/ CSGL account. I request you to issue Cheques/ Demat credit/ CSGL credit to the designated bank/ Demat/ CSGL account only. It is my obligation to inform you of any change in these details.

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein immediately in writing.

In case any of the above information is found to be false or untrue or misleading or misrepresenting I am aware that I may be held liable for it. I have read your terms and conditions and agree to abide by the same.

Date ___ / ___ / 20___

Place _____



1. Pan Card No.
 2. Address Proof
 3. Bank Statement
 4. Photograph
- (All copies should be self attested)

Mail the completed form along with enclosures to:

Head (New Business)
SBI DFHI Ltd
Voltas House, 3rd Floor, 23, J.N.Heredia Marg,
Ballard Estate, Mumbai- 400 001

FOR OFFICE USE ONLY

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of receipt of Registration Form				Signature of Authorized Official			